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PTABSB01 (03-01)

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	10003.000300 (Digeo 132)
First Named Inventor	James A. Billmaier
<b><u>COMPLETE IF KNOWN</u></b>	
Application Number	09/918,610
Filing Date	July 30, 2001
Group Art Unit	2611
Examiner Name	not yet known

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

# SYSTEM AND METHOD FOR USING USER-SPECIFIC INFORMATION TO CONFIGURE AND ENABLE FUNCTIONS IN REMOTE CONTROL, BROADCAST AND INTERACTIVE SYSTEMS

the specification of which	(Title of the Invention)
<input type="checkbox"/> is attached hereto	
OR	
<input checked="" type="checkbox"/> was filed on (MM/DD/YYYY)	07/30/2001
as United States Application Number or PCT International	

Application Number **09/918,610** and was amended on (MM/DD/YYYY) **10/02/2003** (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/026, attached hereto.

[Page 1 of 2]

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PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## DECLARATION — Utility or Design Patent Application

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or Bar Code Label   OR  Correspondence address below

DEGUZMAN OKAMOTO &amp; BENEDICTO, LLP

Name

P.O. Box 51900

Address

Palo Alto

California

94303

City

State

ZIP

U.S.A.

650-691-2030

650-691-2032

Country

Telephone

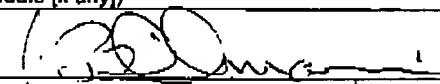
Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

 A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any])

James A.

Family Name  
or SurnameInventor's  
Signature

Date 10-31-01

Woodinville

WA

US

US

Residence: City

State

Country

Citizenship

22322 NE 157<sup>th</sup> Street

Mailing Address

Woodinville

WA

US

US

City

State

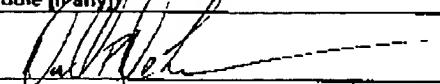
Zip

Country

NAME OF SECOND INVENTOR:

 A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any])

Donald P.

Family Name  
or SurnameInventor's  
Signature

Date 11-5-01

Seattle

WA

US

US

Residence: City

State

Country

Citizenship

14328 Courtland Place

Mailing Address

Seattle

WA

US

US

City

State

Zip

Country

 Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

PTO/SB/02A (11-00)

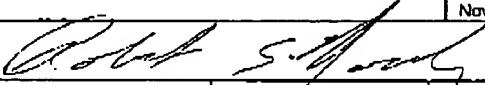
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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet  
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Robert E. 		Novak		
Inventor's Signature		Date 11/5/01		
Residence: City	Kirkland	State	WA	Country
Mailing Address	US Citizenship US			
11706 114 <sup>th</sup> Place NE				
Mailing Address				
City Kirkland	State WA	ZIP 98034	Country US	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Inventor's Signature		Date		
Residence: City	State	Country	Citizenship	
Mailing Address				
Mailing Address				
City	State	Zip	Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Inventor's Signature		Date		
Residence: City	State	Country	Citizenship	
Mailing Address				
Mailing Address				
City	State	Zip	Country	

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PTO/SB/82 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035  
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REVOCATION OF POWER OF  
ATTORNEY OR  
AUTHORIZATION OF AGENT

Application Number	09/918,610
Filing Date	July 30, 2001
First Named Inventor	James A. Billmaier
Group Art Unit	2611
Examiner Name	not yet known
Attorney Docket Number	10003.000300 (digeo 132)

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

A Power of Attorney or Authorization of Agent is submitted herewith.

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Please change the correspondence address for the above-identified application to:

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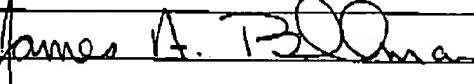
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Name	James A. Billmaier
Signature	
Date	10-25-01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 3 forms are submitted.

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PTO/SB/82 (10-00)

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**OR**

Firm or  
Individual Name

Address

Address

City

Country  State  ZIP

Telephone  Fax

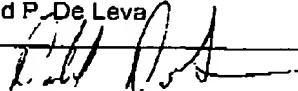
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Assignee of record of the entire interest. See 37 CFR 3.71.

*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

Name	Donald P. De Leva
Signature	
Date	10 25 01

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Submit multiple forms if more than one signature is required, see below.

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PTO/SB/62 (10-00)

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<b>REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT</b>	Application Number	09/918,610
	Filing Date	July 30, 2001
	First Named Inventor	James A. Billmaier
	Group Art Unit	2611
	Examiner Name	not yet known
	Attorney Docket Number	10003.000300 (digeo 132)

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

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Address			
City			
Country		State	ZIP
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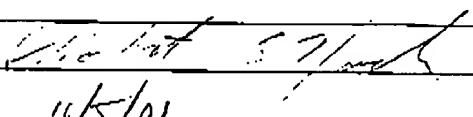
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

Name	Robert E. Novak
Signature	
Date	11/5/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

\*Total of 3 forms are submitted.

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PTO/SB/81 (02-01)

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<b>Application Number</b>	09/918,610
<b>Filing Date</b>	July 30, 2001
<b>First Named Inventor</b>	James A. Billmaier
<b>Group Art Unit</b>	2611
<b>Examiner Name</b>	not yet known
<b>Attorney Docket Number</b>	10003.000300 (Digeo 132)

I hereby appoint:

 Practitioners at Customer Number 

OR

 Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909
Scott Bom	40,523

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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 The above-mentioned Customer Number.

OR

 Practitioners at Customer Number 

OR

 Place Customer Number Bar Code Label here Firm or Individual Name **DEGUZMAN OKAMOTO & BENEDICTO, LLP**Address **P.O. Box 51900**

Address

City **Palo Alto** State **CA** ZIP **94303**Country **U.S.A.**Telephone **650-691-2030** Fax **650-691-2032**

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).***SIGNATURE of Applicant or Assignee of Record**Name **James A. Billmaier**Signature Date **10-23-01**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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I hereby appoint:

 Practitioners at Customer Number  Place Customer  
Number Bar Code  
Label here Practitioner(s) named below:

Name	Registration Number
Arnold M. de Guzman	39,955
James K. Okamoto	40,110
Patrick D. Benedicto	40,909
Scott Bom	40,523

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

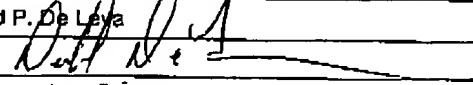
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 The above-mentioned Customer Number.  
OR Practitioners at Customer Number  Place Customer  
Number Bar Code  
Label here Firm or  
Individual Name **DEGUZMAN OKAMOTO & BENEDICTO, LLP**Address **P.O. Box 51900**

Address

City **Palo Alto** State **CA** ZIP **94303**Country **U.S.A.**Telephone **650-691-2030** Fax **650-691-2032**

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
*Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).***SIGNATURE of Applicant or Assignee of Record**Name **Donald P. De Leyva**Signature Date **10 25 01**NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.  
Submit multiple forms if more than one signature is required, see below. \*Total of 3 forms are submitted.

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<b>Application Number</b>	09/918,610
<b>Filing Date</b>	July 30, 2001
<b>First Named Inventor</b>	James A. Billmaier
<b>Group Art Unit</b>	2611
<b>Examiner Name</b>	not yet known
<b>Attorney Docket Number</b>	10003.000300 (Digeo 132)

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 Practitioners at Customer Number 

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 Practitioner(s) named below:

Name	Registration Number
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James K. Okamoto	40,110
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Scott Barn	40,523

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

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OR

 Practitioners at Customer Number  Place Customer  
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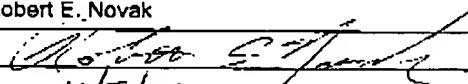
<input checked="" type="checkbox"/> Firm or Individual Name	DEGUZMAN OKAMOTO & BENEDICTO, LLP				
Address	P.O. Box 51900				
Address					
City	Palo Alto	State	CA	ZIP	94303
Country	U.S.A.				
Telephone	650-691-2030	Fax	650-691-2032		

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**SIGNATURE of Applicant or Assignee of Record**

Name	Robert E. Novak
Signature	
Date	11/15/01

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